UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 15-27776
Wendy L Morris	
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/14/2015.
- 2) The plan was confirmed on 11/13/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on NA .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was completed on 07/20/2018.
 - 6) Number of months from filing to last payment: <u>35</u>.
 - 7) Number of months case was pending: <u>40</u>.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: \$18,200.00.
 - 10) Amount of unsecured claims discharged without payment: \$48,004.85.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$6,300.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$6,300.00

\$4,287.40

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$3,970.00
Court Costs \$0.00
Trustee Expenses & Compensation \$317.40
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

Attorney fees paid and disclosed by debtor: \$0.00

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Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
CANCER TREATMENT CENTERS OF A	0	942.00	941.93	941.93	372.12	0.00
CANCER TREATMENT CENTERS OF A		339.00	376.38	376.38	148.69	0.00
COMED LEGAL REVENUE RECOVER		450.00	764.96	764.96	302.20	0.00
ILLINOIS DEPARTMENT OF HUMAN !	Unsecured	1,612.00	1,242.00	1,242.00	490.66	0.00
MUNICIPAL COLLECTIONS OF AMER	Unsecured	1,134.00	762.75	762.75	301.33	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	2,513.00	1,006.43	1,006.43	397.60	0.00
ONECLICKCASH	Unsecured	427.00	NA	NA	0.00	0.00
ONPASVO1	Unsecured	21.00	NA	NA	0.00	0.00
KENNETH MARGULES MD	Unsecured	2,950.00	NA	NA	0.00	0.00
LABCORP	Unsecured	220.00	NA	NA	0.00	0.00
LAKE COUNTY CIRCUIT COURT CLE	Unsecured	1,163.00	NA	NA	0.00	0.00
LAKE COUNTY FOOT & ANKLE LTD	Unsecured	38.00	NA	NA	0.00	0.00
LAKE COUNTY HEALTH DEPARTME	Unsecured	12,284.00	NA	NA	0.00	0.00
LAKE HEART SPECIALISTS	Unsecured	54.00	NA	NA	0.00	0.00
LCA COLLECTIONS	Unsecured	20.00	NA	NA	0.00	0.00
MERCHANTS & MANUFACTURERS E	Unsecured	1,281.00	NA	NA	0.00	0.00
MERCHANTS & MEDICAL CREDIT CO	Unsecured	760.00	NA	NA	0.00	0.00
MIDWESTERN REGIONAL/ARMOR SY	Unsecured	942.00	NA	NA	0.00	0.00
MIDWESTERN REGIONAL MEDICAL	Unsecured	541.00	NA	NA	0.00	0.00
COMCAST	Unsecured	80.00	NA	NA	0.00	0.00
AHM/AMERICAN HONDA MOTORS	Unsecured	5,474.00	NA	NA	0.00	0.00
AMERICAN MEDICAL COLLECTION A	Unsecured	120.00	NA	NA	0.00	0.00
CASH NET USA	Unsecured	1,754.00	NA	NA	0.00	0.00
CERTIFIED SERVICES	Unsecured	55.00	NA	NA	0.00	0.00
CITY OF PARK CITY	Unsecured	100.00	NA	NA	0.00	0.00
CITY OF WAUKEGAN PHOTO ENFOR	Unsecured	300.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CITY OF WAUKEGAN	Unsecured	390.00	NA	NA	0.00	0.00
CITY OF WAUKEGAN POLICE DEPAR	Unsecured	950.00	NA	NA	0.00	0.00
COMMONWEALTH EDISON/CREDIT (Unsecured	235.00	NA	NA	0.00	0.00
CREDIT COLLECTION SERVICE	Unsecured	238.00	NA	NA	0.00	0.00
DR GOPAL BHALALA	Unsecured	42.00	NA	NA	0.00	0.00
DURHAM & DURHAM	Unsecured	25.00	NA	NA	0.00	0.00
GC SERVICES COLLECTION AGENCY	Unsecured	775.00	NA	NA	0.00	0.00
GUARANTY BANK	Unsecured	780.00	NA	NA	0.00	0.00
ILLINOIS BONE AND JOINT INSTITUT	Unsecured	23.00	NA	NA	0.00	0.00
PENN CREDIT	Unsecured	531.00	NA	NA	0.00	0.00
PROMPTMED URGENT CARE	Unsecured	40.00	NA	NA	0.00	0.00
RJM ACQUISITIONS	Unsecured	167.00	NA	NA	0.00	0.00
STELLAR RECOVERY	Unsecured	634.00	NA	NA	0.00	0.00
SUPERIOR AIR GROUND AMBULANC	Unsecured	849.00	NA	NA	0.00	0.00
TMOBILE	Unsecured	634.00	NA	NA	0.00	0.00
TCF AGENCY INC	Unsecured	182.00	NA	NA	0.00	0.00
THE DOCTORS OFFICES/ARMOR SYS	Unsecured	2,659.00	NA	NA	0.00	0.00
TRANSWORLD SYSTEMS INC	Unsecured	920.00	NA	NA	0.00	0.00
UNITED HOSPITAL SYSTEMS/OLIVEF	Unsecured	2,598.00	NA	NA	0.00	0.00
US CELLULAR	Unsecured	100.00	NA	NA	0.00	0.00
VHS PHYSICIAN CLINIC/AMERICOLL	Unsecured	538.00	NA	NA	0.00	0.00
VILLAGE OF BEACH PARK ROUND L	Unsecured	564.00	NA	NA	0.00	0.00
VILLAGE OF GURNEE	Unsecured	250.00	NA	NA	0.00	0.00
VISTA HEALTH SYSTEM PATIENT FIT	Unsecured	198.00	NA	NA	0.00	0.00
VISTA IMAGING	Unsecured	165.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST/CREI	Unsecured	1,748.00	NA	NA	0.00	0.00
WAUKEGAN CLINIC CORP	Unsecured	104.00	NA	NA	0.00	0.00
WELLS FARGO BANK NA	Unsecured	NA	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$5,094.45	\$2,012.60	\$0.00
	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$4,287.40 \$2,012.60	
TOTAL DISBURSEMENTS :		<u>\$6,300.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 12/03/2018 By: /s/ Glenn Stearns
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.